

## **APPLICATION DATA SHEET**

### **Application Information**

<b>Application Number::</b>	Not yet assigned
<b>Filing Date::</b>	December 30, 2003
<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested Classification::</b>	None
<b>Suggested Group Art Unit::</b>	None
<b>CD-ROM or CD-R?::</b>	No
<b>Number of CD Disks::</b>	0
<b>Number of Copies of CDs::</b>	None
<b>Sequence Submission?::</b>	No
<b>Computer Readable Form (CFR)?::</b>	No
<b>Number of Copies of CFR::</b>	None
<b>Title::</b>	PREDICTIVE FILTERING OF REGISTER CACHE ENTRY
<b>Attorney Docket Number::</b>	42339-193266
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	
<b>Total Drawing Sheets::</b>	Seven
<b>Small Entity?::</b>	No
<b>Latin Name::</b>	
<b>Variety Denomination Name::</b>	
<b>Petition Included?::</b>	No
<b>Petition Type::</b>	None
<b>Licensed US Govt. Agency::</b>	
<b>Contract or Grant Numbers::</b>	None
<b>Secrecy Order in Parent Appl.::</b>	

## **Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** USA  
**Country::** USA  
**Status::** Full Capacity  
**Given Name::** John  
**Middle Name::** P.  
**Family Name::** DEVALE  
**Name Suffix::**  
**City of Residence::** Austin  
**State or Province of Residence::** Texas  
**Country of Residence::** USA  
**Street of Mailing Address::** 13510 Briar Hollow Dr.  
**City of Mailing Address::** Austin  
**State or Province of Mailing Address::** Texas  
**Country of Mailing Address::** USA  
**Postal or Zip Code of Mailing Address::** 78729

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** USA  
**Country::** USA  
**Status::** Full Capacity  
**Given Name::** Bryan  
**Middle Name::** P.  
**Family Name::** BLACK  
**Name Suffix::**  
**City of Residence::** Austin  
**State or Province of Residence::** Texas  
**Country of Residence::** USA  
**Street of Mailing Address::** 12116 Robin Ridge Ln.

<b>City of Mailing Address::</b>	Austin
<b>State or Province of Mailing Address::</b>	Texas
<b>Country of Mailing Address::</b>	USA
<b>Postal or Zip Code of Mailing Address::</b>	78750
<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship::</b>	USA
<b>Country::</b>	USA
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Edward
<b>Middle Name::</b>	A.
<b>Family Name::</b>	BREKELBAUM
<b>Name Suffix::</b>	
<b>City of Residence::</b>	Pflugerville
<b>State or Province of Residence::</b>	Texas
<b>Country of Residence::</b>	USA
<b>Street of Mailing Address::</b>	17121 Valley Glen Road
<b>City of Mailing Address::</b>	Pflugerville
<b>State or Province of Mailing Address::</b>	Texas
<b>Country of Mailing Address::</b>	USA
<b>Postal or Zip Code of Mailing Address::</b>	78660
<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship::</b>	USA
<b>Country::</b>	USA
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Jeffrey
<b>Middle Name::</b>	P.
<b>Family Name::</b>	RUPLEY II

**Name Suffix::**

**City of Residence::** Round Rock

**State or Province of Residence::** Texas

**Country of Residence::** USA

**Street of Mailing Address::** 6030 Ronchamps Dr.

**City of Mailing Address::** Round Rock

**State or Province of Mailing Address::** Texas

**Country of Mailing Address::** USA

**Postal or Zip Code of Mailing Address::** 78681

### **Correspondence Information**

**Correspondence Customer Number::** 26694

**Phone Number::** (202) 344-4800

**Fax Number::** (202) 344-8300

**E-Mail Address::** [www.venable.com](http://www.venable.com)

### **Representative Information**

**Representative Customer Number::** 26694

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
<b>Current</b>			
	<b>Continuation of</b>		
	<b>Continuation of</b>		
	<b>Continuation of</b>		

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

## Assignee Information

**Assignee Name:** Intel Corporation  
**Street of Mailing Address:** 2200 Mission College Boulevard  
**City of Mailing Address:** Santa Ana  
**State or Province of Mailing Address:** California  
**Country of Mailing Address:** USA  
**Postal or Zip Code of Mailing Address:** 95052